

Application for Certificate of Zoning Compliance

Shelby County Zoning Office

315 1/2 E. Main St.

Shelbyville, IL 62565

217-294-3876

Shelbyzoning@Shelbycounty-IL.gov

Instructions to Applicants: All information requested below must be provided before any permits will be issued. Applicants are encouraged to visit, call, or email the office of the Zoning Administrator for any assistance needed in completing this form.

Name: _____ Phone: _____

Address: _____
(Street) (City) (Zip Code)

Township: _____ Section: _____

Legal description: (Lot, block, and subdivision; or Metes and bounds; description and acreage.)

Proposed Improvement

- | | |
|--|--|
| <input type="checkbox"/> New Residence(Stick Built) | <input type="checkbox"/> Modular Home |
| <input type="checkbox"/> Garage | <input type="checkbox"/> Billboard |
| <input type="checkbox"/> Machine Shed | <input type="checkbox"/> Communication Tower |
| <input type="checkbox"/> Grain Bin | |
| <input type="checkbox"/> Addition or alteration | (Explain): _____ |
| <input type="checkbox"/> Mobile/Manufactured Home | |
| <input type="checkbox"/> Relocation of Existing Building | |
| <input type="checkbox"/> Other (Explain): _____ | |

Is the proposed improvement for agricultural purposes? Yes_____ No_____

Is the proposed improvement going to be on a permanent foundation? Yes_____ No_____

Is the proposed improvement located in a flood plain district? Yes_____ No_____

CONTINUE ON NEXT PAGE

Proposed Structure:

No. of Rooms:

Bath: _

Sq. Ft. of Structure _____

Bedrooms: _

Est. Cost(if New Res) _____

No of Stories _____

Utilities: ☐ Public Water Service

☐ Public Sewer Service

☐ Private Well

☐ Private Sewage Disposal

Permit # _____

**REQUIRED BEFORE PERMIT
CAN BE ISSUED**

Present Use of Property:

☐ Single Family

☐ Vacant Lot

☐ Multi-Family

☐ Business (type) _____

No. of Units _____

☐ Industrial (type) _____

☐ Other: _____

Proposed Use of Property:

Residential:

☐ Single Family

Accessory:

☐ Garage

☐ Multi-Family

☐ Storage Shed

No. of Units: _____

☐ Industrial (type): _____

☐ Business (type): _____

☐ Other: _____

Application is hereby made for a Certificate of Zoning Compliance – Building Permit, as required under the Zoning Ordinance for the erection, alteration, and use of buildings and premises. In making this application the applicant represents all of the above statements and any attached maps and drawings to be a true description of the proposed new or altered uses and/or buildings. The applicant agrees that the permit issued may be revoked without notice on any breach of representation or conditions.

It is understood that any permit issued on this Application will not grant right of privilege to erect any structure or to use any premises described for any purpose or in any manner prohibited by the Zoning Ordinance, or by other ordinances, codes or regulations of Shelby County.

Date: _____

Applicant(s): _____

CONTINUE ON NEXT PAGE

SITE PLAN

A site plan must be attached or drawn below at a scale large enough for clarity showing the following information:

- A. Location and dimensions of: Lot, building, driveways, and off-street parking spaces.
- B. Distance between: Buildings and front, side and rear lots lines; Principal building and accessory buildings; Principal building and principal buildings on adjacent lots.
- C. Location of: Signs, easements, underground utilities, septic tanks, tile fields, water wells, etc.
- D. Any additional information as may reasonably be required by Zoning Administrator and applicable sections of the Zoning Ordinance.

Scale: 1" _____



***ZONING OFFICE USE ONLY**

Application Approval

The plans and specifications submitted with this application are in conformity with the zone district requirements applicable to the subject property. Changes in plans or specifications shall not be made without written approval of the appropriate County officials. Failure to comply with the above shall constitute a violation of the provisions of the Zoning Ordinance. This permit shall be a final permit when signed by the Building Inspector or Zoning Administrator after a required final inspection.

Permanent Parcel Number: _____ Current Zoning _____

Fee: _____ Fee Paid Date: _____

Application Approved () YES () NO (Explain) _____

Permit Approval Number: _____

Date: _____

Zoning Administrator

Certificate of Occupancy

The final inspection of the premises having been made and compliance with the original building permit and other County Zoning regulations having been indicated, the premise is hereby approved for occupancy in accordance with the Zoning of Shelby County.

Date: _____

Zoning Administrator

06/23 SM